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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/866,003	05/25/2001	Jeff Swanson	31255-1002	5858

7590 09/22/2005
KYOCERA WIRELESS CORP.
P.O. BOX 928289
SAN DIEGO, CA 92192-8289

EXAMINER

SHARMA, SUJATHA R

ART UNIT	PAPER NUMBER
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2684

DATE MAILED: 09/22/2005

Please find below and/or attached an Office communication concerning this application or proceeding.

Interview Summary	Application No. 09/866,003	Applicant(s) SWANSON ET AL.	
	Examiner Sujatha Sharma	Art Unit 2684	

All participants (applicant, applicant's representative, PTO personnel):

(1) Sujatha Sharma. (3) _____.

(2) Noel Gillespie (Reg.No. 47,596). (4) _____.

Date of Interview: 7/21/05

Type: a) ☒ Telephonic b) ☐ Video Conference
c) ☐ Personal [copy given to: 1) ☐ applicant 2) ☐ applicant's representative]

Exhibit shown or demonstration conducted: d) ☐ Yes e) ☐ No.
If Yes, brief description: _____.

Claim(s) discussed: _____.

Identification of prior art discussed: Haskins [US 4,734,679].

Agreement with respect to the claims f) ☐ was reached. g) ☒ was not reached. h) ☐ N/A.

Substance of Interview including description of the general nature of what was agreed to if an agreement was reached, or any other comments: The examiner agrees with the applicant's arguments. A new office action will be submitted regarding the amended claims.

(A fuller description, if necessary, and a copy of the amendments which the examiner agreed would render the claims allowable, if available, must be attached. Also, where no copy of the amendments that would render the claims allowable is available, a summary thereof must be attached.)

THE FORMAL WRITTEN REPLY TO THE LAST OFFICE ACTION MUST INCLUDE THE SUBSTANCE OF THE INTERVIEW. (See MPEP Section 713.04). If a reply to the last Office action has already been filed, APPLICANT IS GIVEN ONE MONTH FROM THIS INTERVIEW DATE, OR THE MAILING DATE OF THIS INTERVIEW SUMMARY FORM, WHICHEVER IS LATER, TO FILE A STATEMENT OF THE SUBSTANCE OF THE INTERVIEW. See Summary of Record of Interview requirements on reverse side or on attached sheet.

Sujatha Sharma

7/21/05

571-272-7886

Examiner Note: You must sign this form unless it is an Attachment to a signed Office action.

Examiner's signature, if required